



HAWAII STATE ETHICS COMMISSION
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P.O. BOX 616, HONOLULU, HAWAII 96809
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STATE OF HAWAII
STATE ETHICS COMMISSION

LOBBYIST REGISTRATION FORM

(Type or Print Clearly)

PART I LOBBYIST				
NAME (Last)		(First)	(Middle)	TELEPHONE
Souki		Jeannine	A.	544-8300
MAILING ADDRESS (Street)				FAX
999 Bishop St., 23rd Flr.				544-8399
(City)		(State)	(Zip Code)	
Honolulu		HI	96813	
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)				TELEPHONE
Watanabe Ing & Komeiji LLP				544-8300
MAILING ADDRESS (Street)				FAX
999 Bishop St., 23rd Flr.				544-8399
(City)		(State)	(Zip Code)	
Honolulu		HI	96813	

PART II ORGANIZATION			
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)			TELEPHONE
Aloha Airlines			539-5972
MAILING ADDRESS (Street)			FAX
500 Ala Moana Blvd., Suite 500; Two Waterfront Plaza			836-0303
(City)		(State)	(Zip Code)
Honolulu		HI	96813
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT			TELEPHONE
Jeannine A. Souki			544-8300
MAILING ADDRESS (Street)			FAX
999 Bishop St., 23rd Flr.			544-8399
(City)		(State)	(Zip Code)
Honolulu		HI	96813

PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY

- | | | | |
|--|--|---|---|
| <input type="checkbox"/> Agriculture | <input type="checkbox"/> Education | <input type="checkbox"/> Human Services | <input type="checkbox"/> Science, Technology & Economic Development |
| <input type="checkbox"/> Communications & Public Utilities | <input checked="" type="checkbox"/> Government Operation & Finance | <input type="checkbox"/> Intergovernmental Relations, International Affairs | <input checked="" type="checkbox"/> Tourism & Recreation |
| <input checked="" type="checkbox"/> Consumer Protection & Commerce | <input type="checkbox"/> Hawaiian Affairs | <input checked="" type="checkbox"/> Labor & Employment | <input checked="" type="checkbox"/> Transportation |
| <input type="checkbox"/> Culture, Arts, Historic Preservation | <input type="checkbox"/> Health | <input type="checkbox"/> Planning, Land & Water Use Management | <input type="checkbox"/> Other: (indicate below) |
| <input checked="" type="checkbox"/> Ecology, Energy Environmental Protection | <input type="checkbox"/> Housing | <input type="checkbox"/> Public Safety & Corrections | _____ |

PART IV CERTIFICATION OF LOBBYIST

I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.



(Signature of Lobbyist)

1/22/07

(Date)

PART V AUTHORIZATION TO LOBBY

NAME	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED
Stephanie Ackerman	Sr. Vice President, Public Relations & Govt Affairs

NAME OF ORGANIZATION (if applicable)
Aloha Airlines

TELEPHONE
539-5972

MAILING ADDRESS (Street)
500 Ala Moana Blvd., Suite 500; Two Waterfront Plaza

FAX
836-0303

(City)
Honolulu

(State)
HI

(Zip Code)
96813

I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.



(Signature of Authorizing Officer or Person Represented)

Jan 23, 2007

(Date)